

1. REPORT DATE	2. FUNCTION OF REPORT (CHECK	ONE)	OFFICE USE ONLY
	INDEPENDENT EXPENDITUR STATEMENT (S-1) INTERNAL DISSEMINATION REPORT (S-2)	e OR	BB

	MMITTEE EXPEND IONS ON REVERSE SIE		PORT	:	STATEMENT (S-1) INTERNAL DISSEMINAT	OR TION	
3. NAME OF PERSON OR		NDITURE(S))	i	REPORT (S-2)		
Carpenters Regiona	I Council				N16101	3	
4. MAILING ADDRESS	5. TELEPHONE NUMBER						
ADDRESS: 1401 CITY / STATE / ZIP: St Lo	1 Hampton Ave ouis, MO 63139		314-644-4800				
TYPE OF ELECTION (C	CHECK ONE)				7. DATE OF ELECTION		
PRIMARY	GENERAL	SPECIAL	- [CAUCUS		11-1-16	
3. TYPE OF REPORT (CH		VITHIN 14 DA	YS OF ELE	CTION	ADDITIONAL REPORT	OTHER	
9. NAME OF CANDIDATE OR BALLOT MEASURE	10. OFFICE SOUGHT AND/OR POLITICAL SUBDIVISION	11.CHECK ONE SUPP OPP	EXF 12. PA	HEDULE OF PENDITURES YEE NAME AND ADDRESS	13. NATURE AND PURPOSE OF EXPENDITURE	14. DATE MADE	15. AMOUNT
Anne Zerr	Senate	✓	100 E	PS Impact E. Grand Ave bines, IA 50309	Member to member mailing	7-20-16	2904.56
John Rizzo	Senate	√	100 E	PS Impact E. Grand Ave bines, IA 50309	Member to member mailing	7-20-16	1000.22
Kevin Corlew	MO State Rep	1	100 E	PS Impact E. Grand Ave bines, IA 50309	Member to member mailing	7-20-16	237.20
Shiela Solon	MO State Rep	√	100 E	PS Impact E. Grand Ave bines, IA 50309	Member to member mailing	7-20-16	491.60
Chrissy Sommer	MO State Rep	✓	100 E	PS Impact E. Grand Ave bines, IA 50309	Member to member mailing	7-20-16	835.04
Shane Roden	MO State Rep	1	100 [PS Impact E. Grand Ave bines, IA 50309	Member to member mailing	7-20-16	1206.24
Jeff Schwentker	MO State Rep		100 (PS Impact E. Grand Ave bines, IA 50309	Member to member mailing	7-20-16	815.96
		•				7-20-10	010.90
16. TOTAL EXPEND	ITURES MADE (TO	TAL COLU	JMN 15)			\$	7,490.82
17. VERIFICATION:	I CERTIFY THAT T	HIS REPO	RT IS TR	UE AND COMP	PLETE M.E.	C. ID NO	
SIGNATURE OF PERSON		ITURE(S) OF	R AN AUTHO	ORIZED AGENT		DATE	
111. 4:11 (1.00						$ \mathcal{A},\mathcal{Y} $	3-16

MO 300-0697 (10-06) Missouri Ethics Commission

S-1 OR S-2



x • •							
	URI ETHICS CO		ON	2. FUNCTION OF REPORT (C INDEPENDENT EXPEN	DITURE	OFFICE USE ONLY	
NON-COMMITTEE EXPENDITURE REPORT INSTRUCTIONS ON REVERSE SIDE				STATEMENT (S-1) INTERNAL DISSEMINA REPORT (S-2)	OR TION		
3. NAME OF PERSON OR Carpenters Regiona		NDITURE(S	5)	KET OKT (0-2)			
4. MAILING ADDRESS			· · · · · · · · · · · · · · · · · · ·				
ADDRESS: 1401	I Hampton Ave			5. TELEPHONE NUMBER			
CITY / STATE / ZIP: St Lo	ouis, MO 63139				-644-4800		
S. TYPE OF ELECTION (CHECK ONE) PRIMARY GENERAL SPECIAL CAUCUS				7. DATE OF ELECTION 11-1-16			
B. TYPE OF REPORT (CH		/ITHIN 14 DA	AYS OF ELECTION	ADDITIONAL REPORT	OTHER		
9. NAME OF CANDIDATE OR BALLOT MEASURE	10. OFFICE SOUGHT AND/OR POLITICAL SUBDIVISION	11.CHECK ONE SUPP OPP	SCHEDULE OF EXPENDITURES 12. PAYEE NAME AND ADDRESS	13. NATURE AND PURPOSE OF EXPENDITURE	14. DATE MADE	15. AMOUNT	
Anne Zerr	Senate		Carpenters Dist Counci 1401 Hampton St Louis MO 63139	Mailing done by the CDC postage			
		V			7-12-16	390.34	
John Rizzo	Senate		Carpenters Dist Council 1401 Hampton	il Mailing done by the CDC postage			
		√	St Louis MO 63139	the CDC postage	7-12-16	106.99	
Nick King	MO State Rep		Carpenters Dist Counc	-	·		
		√	1401 Hampton St Louis MO 63139	the CDC postage	7-12-16	68.28	
Bill Kidd	MO State Rep		Carpenters Dist Counc	il Mailing done by			
			1401 Hampton St Louis MO 63139	the CDC postage			
		✓	St Louis MO 03139		7-12-16	30.67	
Kevin Corlew	MO State Rep		Carpenters Dist Counci	_		,	
			1401 Hampton St Louis MO 63139	the CDC postage	7 40 40	40.07	
OI : 0	1000	V	0	1	7-12-16	19.87	
Chrissy Sommer	MO State Rep	į	Carpenters Dist Counc 1401 Hampton	il Mailing done by the CDC postage			
		✓ :	St Louis MO 63139		7-12-16	70.44	
Jeff Schwentker	MO State Rep		Carpenters Dist Counc	il Mailing done by			
			1401 Hampton	the CDC postage			
		/	St Louis MO 63139		7-12-16	68.85	
Shane Roden	MO State Rep		Carpenters Dist Counc 1401 Hampton	il Mailing done by the CDC postage			

St Louis MO 63139 151.62 7-12-16 907.06 16. TOTAL EXPENDITURES MADE (TOTAL COLUMN 15) 17. VERIFICATION: I CERTIFY THAT THIS REPORT IS TRUE AND COMPLETE M.E.C. ID NO. SIGNATURE OF PERSON MAKING THE EXPENDITURE(S) OR AN AUTHORIZED AGENT DATE

MO 300-0697 (10-06)



	URI ETHICS CO	2. FUNCTION OF REPORT (CHECK ONE) INDEPENDENT EXPENDITURE STATEMENT (S-1) OR		OFFICE USE ONLY			
NON-COMMITTEE EXPENDITURE REPORT INSTRUCTIONS ON REVERSE SIDE				INTERNAL DISSEMINATION REPORT (S-2)			
. NAME OF PERSON OR Carpenters Regiona	RENTITY MAKING EXPE	NDITURE(S)	NET ON (0-2)	·		
. MAILING ADDRESS	- Council			E TELEDUONE NUMBER			
DDRESS: 1401	I Hampton Ave			5. TELEPHONE NUMBER			
ITY / STATE / ZIP: St Lo	ouis, MO 63139				-644-4800		
TYPE OF ELECTION (C	CHECK ONE) GENERAL [SPECIAL	CAUCUS	7. DATE OF ELECTION 11-1-16			
TYPE OF REPORT (CH		/ITHIN 14 DA	AYS OF ELECTION	ADDITIONAL REPORT	OTHER		
NAME OF CANDIDATE OR BALLOT MEASURE	10. OFFICE SOUGHT AND/OR POLITICAL SUBDIVISION	11.CHECK ONE SUPP OPP	SCHEDULE OF EXPENDITURES 12. PAYEE NAME AND ADDRESS	13. NATURE AND PURPOSE OF EXPENDITURE	14. DATE MADE	15. AMOUNT	
Lee Smith	MO State Rep		Carpenters Dist Counc 1401 Hampton	Mailing done by the CDC postage	: :		
5		 	St Louis, MO 63139		7-12-16	32.79	
		i					
		1					
		İ					
		i					
			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
6. TOTAL EXPENDITURES MADE (TOTAL COLUMN 15) \$					32.79		

17. VERIFICATION: I CERTIFY THAT THIS REPORT IS TRUE AND COMPLETE M.E.C. ID NO. DATE - 33-1 SIGNATURE OF PERSON MAKING THE EXPENDITURE(S) OR AN AUTHORIZED AGENT